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Fax Cover Sheet

To: Z. Peter Sawicki	From: Rodney M. Lindsey
Application/Control Number: 09/519,889	Art Unit: 3765
Fax No.: 612-334-3312	Phone No.: (571) 272-4989
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Re: Supplemental Declaration	CC:
Urgent For Review For Comm	ent For Reply Per Your Request

for submission with reissue claims in proper amended format

Number of pages 2 including this page

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SUPPLEMENTAL DECLARATION FOR REISSUE PATENT APPLICATION TO CORRECT "ERRORS" STATEMENT (37 CFR 1.175)

Attorney Docket Number		
First Named Inventor	 	
COMPL	ETE.	
Application Number	. 1	
Filing Date		
Group Art Unit		
Examiner Name		

I/We hereby declare that:

Every error in the patent which was corrected in the present reissue application, and which is not covered by the prior oath(s) and/or declaration(s) submitted in this application, arose without any deceptive intention on the part of the applicant.

I/We hereby declare that all statements made herein of my/our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:	A petition has been filed for this unsigned inventor
Given Name (first and middle [if any])	Family Name or Surname
Inventor's	
Signature	Date
lame of Second Inventor:	A petition has been filed for this unsigned inventor
Given Name (first and middle [if any])	Family Name or Surname
•	·
Inventor's Signature	Date
Name of Third Inventor:	A petition has been filed for this unsigned inventor
Given Name (first and middle [if any])	Family Name or Sumame
Inventor's	
Signature	Date
Name of Fourth Inventor:	A petition has been filed for this unsigned inventor
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[Page 1 of 1]